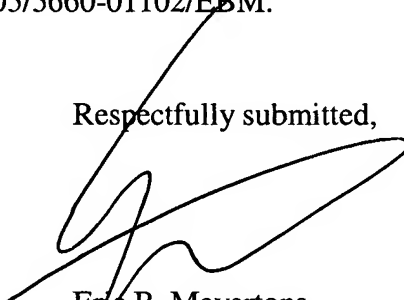


- (8) Fee Authorization in the amount of \$634.00 (2 pages); and
- (9) A return postcard.

If an extension of time is required, Applicant hereby respectfully requests the appropriate extension of time. If any fees are omitted, or if any additional fees are required or have been overpaid, please appropriately charge or credit those fees to Meyertons, Hood, Kivlin, Kowert & Goetzel, P.C. Deposit Account Number 50-1505/5660-01102/EBM.

Respectfully submitted,



Eric B. Meyertons
Reg. No. 34,876

MEYERTONS, HOOD, KIVLIN, KOWERT & GOETZEL, P.C.
P.O. BOX 398
AUSTIN, TX 78767-0398
(512) 853-8800 (voice)
(512) 853-8801 (facsimile)

Date: 12-9-03

Application No.: 10/617,484
Confirmation No.: 2842
Filing Date: July 11, 2003
Inventor: Thomas D. Marshall

Examiner: Unknown
Art Unit: 3713
Atty. Dkt. No.: 5660-01102

Title: MODEL OF DENTAL CARIES

DATE OF DEPOSIT: 12-9-03

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail on the date indicated above and is addressed to:

Commissioner for Patents
Alexandria, VA 22313-1450

Jackie L. Pitre

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

The Commissioner is hereby authorized to charge the following fees to Meyertons, Hood, Kivlin, Kowert & Goetzel, P.C. Deposit Account Number 50-1505/5660-01102/EBM:

1. Basic Filing Fee (Utility)	\$385.00
2. 16 claims in excess of 20 claims	\$144.00
3. Late declaration surcharge	\$65.00
4. Assignment recordation fee	\$40.00

TOTAL AMOUNT: \$634.00

The Commissioner is also authorized to charge any extension fee or other fees that may be necessary to the same account number.

Inventor: Thomas D. Marshall

Appl. Ser. No.: 10/617,484

Atty. Dckt. No.: 5660-01102

Respectfully submitted,



Eric B. Meyertons

Reg. No. 34,876

Attorney for Applicant

MEYERTONS, HOOD, KIVLIN, KOWERT & GOETZEL, P.C.

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